EA-100 Request for Elder or Dependent Adult Abuse Restraining Orders

Clerk stamps date here when form is filed.

Read *Can a Restraining Order to Prevent Elder or Dependent Adult Abuse Help Me?* (form EA-100-INFO) before completing this form. Also fill out *Confidential CLETS Information* (form CLETS-001) with as much information as you know.

1 Elder or Dependent Adult in Need of Protection

Full Name: _____

Gender: ☐ M ☐ F ☐ Nonbinary Age: _____

2 Person From Whom Protection Is Sought

Full Name: _____

Address *(if known):* _____

City: _____ State: _____ Zip: _____

Fill in court name and street address:

Superior Court of California, County of
Round Valley Indian Tribes
Tribal Court
77826 Covelo Road
Covelo, CA 95428

Court fills in case number when form is filed.

Case Number:

3 Person Requesting Order

Who is asking the court for protection? *(Check a, b, or c):*

a. ☐ The elder or dependent adult named in 1.

b. ☐ Name: _____
conservator of the ☐ person ☐ estate ☐ person and estate of the person named in 1, appointed by *(name of court):* _____
Case No.: _____

c. ☐ Other *(name)* _____

(Show this person's legal authority to make this request on an attached sheet of paper. Write "Attachment 3c—Information About Person Requesting Protective Order" for a title. You may use form MC-025, Attachment.*)*

4 Contact Information

Contact information for the person asking the court for protection

a. Your Lawyer *(if you have one for this case)*
Name: _____ State Bar No.: _____
Firm Name: _____

b. Your Address *(If you have a lawyer, give your lawyer's information. If you do not have a lawyer and want to keep your home address private, you may give a different mailing address instead. The person in 1 does not have to give telephone, fax, or email.)*
Address: _____
City: _____ State: _____ Zip: _____
Telephone: _____ Fax: _____
Email Address: _____

This is not a Court Order.

Case Number:

5 Description of Protected Person

The person named in 1 *(check a or b):*

a. ☐ Is age 65 or older and a resident of California.

b. ☐ Is a resident of California and an adult under age 65. This person has physical or mental limitations that restrict their ability to carry out normal activities or protect their rights. *(Briefly describe limitations on an attached sheet of paper or form MC-025. Write "Attachment 5b—Description of Protected Person" for a title.)*

6 Additional Protected Persons

a. Are you asking for protection for any other family or household members or for the conservator of the elder or dependent adult listed in 1? ☐ Yes ☐ No *(If yes, list them):*

Full Name	Gender	Age	Relation to person in 1?	Lives with person in 1?
				☐ Yes ☐ No
				☐ Yes ☐ No
				☐ Yes ☐ No
				☐ Yes ☐ No

☐ *Check here if there are more persons. Attach a sheet of paper and write "Attachment 6a—Additional Protected Persons" for a title. You may use form MC-025,* Attachment.

b. Why do these people need protection? *(Explain below):*

☐ *Check here if there is not enough space for your answer. Put your complete answer on an attached sheet of paper or form MC-025 and write "Attachment 6b—Why Others Need Protection" for a title.*

7 Relationship of Parties

How does the person in 1 know the person in 2? *(Explain below):*

☐ *Check here if there is not enough space for your answer. Put your complete answer on an attached sheet of paper or form MC-025 and write "Attachment 7—Relationship of Parties" for a title.*

This is not a Court Order.

Case Number:

8 Description of Abuse

a. Abuse means either:

(1) Physical abuse, neglect, financial abuse, abandonment, isolation, abduction, or other treatment with resulting physical harm or pain or mental suffering; or

(2) The withholding by a caretaker of goods or services that are necessary to avoid physical harm or mental suffering.

b. Tell the court about the last time the person in (2) abused the person in (1).

(1) When did it happen? *(Provide date or estimated date):* _____

(2) Who else was there?

_____

(3) Describe what happened below.

☐ *Check here if there is not enough space for your answer. Put your complete answer on an attached sheet of paper or form MC-025 and write "Attachment 8b(3)—Describe Abuse" for a title.*

_____

_____

_____

_____

(4) Was the abuse **solely financial abuse** unaccompanied by force, threat, harassment, intimidation, or any other form of abuse?

☐ Yes, only financial abuse. ☐ No, the abuse included other forms of abuse described above.

(5) Did the person in (2) use or threaten to use a gun or any other weapon?

☐ Yes ☐ No *(If yes, explain below):*

☐ *Check here if there is not enough space for your answer. Put your complete answer on an attached sheet of paper or form MC-025 and write "Attachment 8b(5)—Use of Weapons" for a title.*

_____

_____

_____

_____

(6) Was the person in (1) harmed or injured as a result of the acts of abuse described above?

☐ Yes ☐ No *(If yes, explain below):*

☐ *Check here if there is not enough space for your answer. Put your complete answer on an attached sheet of paper or form MC-025 and write "Attachment 8b(6)—Harm or Injury" for a title.*

_____

_____

_____

_____

(7) Did the police come? ☐ Yes ☐ No

If yes, did they give the person in (1) or the person in (2) an Emergency Protective Order? ☐ Yes ☐ No

If yes, the order protects *(check all that apply):*

☐ the person in (1) ☐ the person in (2) ☐ the persons in (6).

(Attach a copy of the order if you have one.)

This is not a Court Order.

8 c. Is the person in (2) a care custodian who deprived the person in (1) of (kept from the person, did not allow the person to have or receive, or did not provide the person with) goods or services that the person needed to avoid physical harm or mental suffering? ☐ Yes ☐ No
(If yes, describe below what the person was deprived of and how that affected the person):

☐ *Check here if there is not enough space for your answer. Put your complete answer on an attached sheet of paper or form MC-025 and write "Attachment 8c—Deprivation by Care Custodian" for a title.*

d. Has the person in (2) abused the person in (1) at other times?
☐ Yes ☐ No *(If yes, describe prior incidents and provide dates below):*

☐ *Check here if there is not enough space for your answer. Put your complete answer on an attached sheet of paper or form MC-025 and write "Attachment 8d—Previous Abuse" for a title.*

9 Venue

Why are you filing in this county? *(Check all that apply):*

a. ☐ The person in (2) lives in this county.
b. ☐ The person in (1) was abused by the person in (2) in this county.
c. ☐ Other *(specify):* _____

10 Other Court Cases

a. Has the person in (1) or any of the persons named in (6) been involved in another court case with the person in (2)? ☐ No ☐ Yes *(If yes, specify the kind of each case and indicate where and when each was filed):*

Kind of Case	Filed in *(County/State)*	Year Filed	Case Number *(if known)*
(1) ☐ Elder or Dependent Adult Abuse			
(2) ☐ Civil Harassment			
(3) ☐ Domestic Violence			
(4) ☐ Divorce, Nullity, Legal Separation			
(5) ☐ Paternity, Parentage, Child Custody			
(6) ☐ Eviction			
(7) ☐ Guardianship			
(8) ☐ Workplace Violence			
(9) ☐ Small Claims			
(10) ☐ Criminal			
(11) ☐ Other *(specify):* _____			

b. Are there now any protective or restraining orders in effect relating to the person in (1) or any of the persons named in (6) and the person in (2)? ☐ No ☐ Yes *(If yes, attach a copy if you have one.)*

This is not a Court Order.

Check the orders you want. þ

(11) ☐ Personal Conduct Orders

I ask the court to order the person in (2) **not** to do any of the following things to the person in (1) or to any person to be protected listed in (6):

a. ☐ Physically abuse, financially abuse, intimidate, molest, attack, strike, stalk, threaten, assault (sexually or otherwise), hit, harass, destroy the personal property of, or disturb the peace of the person.

b. ☐ Contact the person, either directly or indirectly, in **any** way, including, but not limited to, in person, by telephone, in writing, by public or private mail, by interoffice mail, by email, by text message, by fax, or by other electronic means.

c. ☐ Other (*specify):*

☐ *Check here if there is not enough space for your answer. Put your complete answer on an attached sheet of paper or form MC-025 and write "Attachment 11c—Other Personal Conduct Orders" for a title.*

_____

_____

_____

The person in (2) will be ordered not to take any action to get the addresses or locations of any protected person unless the court finds good cause not to make the order.

(12) ☐ Stay-Away Orders

a. I ask the court to order the person in (2) to stay at least _____ yards away from *(check all that apply):*

(1) ☐ The elder or dependent adult in (1).

(2) ☐ The persons in (6).

(3) ☐ The home of the elder or dependent adult.

(4) ☐ The job or workplace of the elder or dependent adult.

(5) ☐ The vehicle of the elder or dependent adult.

(6) ☐ Other *(specify):* _____

_____

_____

b. If the court orders the person in (2) to stay away from all the places listed above, will they still be able to get to their home, school, or job? ☐ Yes ☐ No *(If no, explain below):*

☐ *Check here if there is not enough space for your answer. Put your complete answer on an attached sheet of paper or form MC-025 and write "Attachment 12b—Stay-Away Orders" for a title.*

_____

_____

_____

_____

This is not a Court Order.

13 ☐ Move-Out Order

I ask the court to order the person in (2) to move out from and not return to the residence at *(address):*

The person in (1) will suffer physical or emotional harm if the person in (2) does not leave the residence. The person in (2) is not named in the title or lease of the residence, either alone or with others beside the person in (1).

☐ I ask for this move-out order right away to last until the hearing, because:

a. The person in (2) assaulted or threatened the person in (1); and

b. The person in (1) has the right to live at the above residence. *(Explain below):*

☐ *Check here if there is not enough space for your answer. Put your complete answer on an attached sheet of paper or form MC-025 and write "Attachment 13b—My Right to Residence" for a title.*

14 ☐ Order for Counseling or Anger Management Courses

ⓘ This item is only available in instances of alleged physical abuse or deprivation of care, not in cases with only alleged financial abuse.

a. I request the person in (2) be ordered by the court to attend clinical counseling or anger management courses provided by a professional (a counselor, psychologist, psychiatrist, therapist, clinical social worker, or mental or behavioral health professional licensed in the State of California to provide counseling or anger management courses).

b. Explain why you are requesting an order that the person in (2) attend clinical counseling or anger management courses.

☐ *Check here if there is not enough space for your answer. Put your complete answer on an attached sheet of paper or form MC-025 and write "Attachment 14b— Counseling or Anger Management" for a title.*

15 Firearms (Guns), Firearm Parts, and Ammunition

Does the person in (2) have firearms (guns), firearm parts, or ammunition? (This includes firearm receivers and frames, and any item that may be used as or easily turned into a receiver or frame (see Penal Code section 16531).)

a. ☐ I don't know
b. ☐ No
c. ☐ Yes *(If you have information, complete the section below.)*

Describe Firearms (Guns), Firearm Parts, or Ammunition	Number or Amount	Location, if known
(1)		
(2)		
(3)		
(4)		
(5)		
(6)		

Unless the abuse is only financial, if the judge grants a protective order, the person in (2) will be prohibited from owning, possessing, purchasing, receiving, or attempting to purchase or receive firearms (guns), firearm parts, and ammunition while the protective order is in effect. The person in (2) will also be ordered to turn in to law enforcement, or sell to or store with a gun dealer, any firearms (guns), firearm parts, and ammunition within the respondent's immediate possession or control. If an order is granted, the person in (2) will also be prohibited from owning, possessing, or buying body armor and would have to relinquish any they have.

16 ☐ Temporary Restraining Order

I request that a Temporary Restraining Order (TRO) be issued against the person in (2) to last until the hearing. I am presenting form EA-110, *Temporary Restraining Order,* for the court's signature together with this *Request*.

Has the person in (2) been told that you were going to go to court to seek a TRO against them?

☐ Yes ☐ No *(If you answered no, explain why below):*

☐ *Check here if there is not enough space for your answer. Put your complete answer on an attached sheet of paper or form MC-025 and write "Attachment 16—Temporary Restraining Order" for a title.*

This is not a Court Order.

17 ☐ Request to Give Less Than Five Days' Notice of Hearing

You must have your papers personally served on the person in 2 at least five days before the hearing, unless the court orders a shorter time for service. *(Read form EA-200-INFO, What Is "Proof of Personal Service"?, to learn about serving legal papers. Form EA-200, Proof of Personal Service, may be used to show the court that the papers have been served.)*

If you want there to be less than five days between service and the hearing, explain why:

☐ *Check here if there is not enough space for your answer. Put your complete answer on an attached sheet of paper or form MC-025 and write "Attachment 17—Request to Give Less Than Five Days' Notice" for a title.*

_____

_____

_____

_____

18 ☐ Debts Caused by Financial Abuse

You can ask the judge to decide at the hearing that certain debts or bills you have were caused by the person in 2's financial abuse. This may help you defend against the debt if you are sued in another case.

a. If you want the judge to make this special finding, list the debts or bills you have that were caused by the person in 2's financial abuse.

☐ *Check here if you want to list additional debts or bills that were caused by financial abuse. You can attach form MC-025 and write "Attachment 18a—Additional Debts" for a title.*

	Money Owed To	For	Amount
(1)	_____	_____	$ _____
(2)	_____	_____	$ _____
(3)	_____	_____	$ _____

b. Describe what the person in 2 did to cause the debts and bills that you listed above. Provide as much detail as you can about the person in 2's financial abuse.

☐ *Check here if there is not enough space for your answer. Put your complete answer on an attached sheet of paper or form MC-025 and write "Attachment 18b—How Debt Was Incurred" for a title.*

_____

_____

_____

_____

This is not a Court Order.

19 ☐ Lawyer's Fees and Costs

I ask the court to order payment of my ☐ lawyer's fees ☐ court costs.

The amounts requested are:

Item	Amount	Item	Amount
	$		$
	$		$
	$		$

☐ *Check here if there are more items. Put the items and amounts on an attached sheet of paper or form MC-025 and write "Attachment 19—Lawyer's Fees and Costs" for a title.*

20 ☐ Possession and Protection of Animals

I ask the court to order the following:

a. ☐ That the person in (1) be given the sole possession, care, and control of the animals listed below, which they own, possess, lease, keep, or hold, or which reside in their household.
(Identify animals by, e.g., type, breed, name, color, sex.)

I request sole possession of the animals because *(specify good cause for granting order)*:

☐ *Check here if there is not enough space for your answer. Put your complete answer on an attached sheet of paper or form MC-025 and write "Attachment 20a—Possession of Animals" for a title.*

b. ☐ That the person in (2) must stay at least _____ yards away from, and not take, sell, transfer, encumber, conceal, molest, attack, strike, threaten, harm, or otherwise dispose of, the animals listed above.

21 No Fee to Serve Orders

If you want the sheriff or marshal to serve (notify) the person in (2) about the orders for free, ask the court clerk what you need to do.

This is not a Court Order.

22 ☐ Additional Orders Requested

I ask the court to make the following additional orders *(specify)*:

☐ *Check here if there is not enough space for your answer. Put your complete answer on an attached sheet of paper or form MC-025 and write "Attachment 22—Additional Orders Requested" for a title.*

23 Number of pages attached to this form, if any: _____

Date: _____

_____ ▶ _____

Lawyer's name (if any) *Lawyer's signature*

I declare under penalty of perjury under the laws of the State of California that the information above and on all attachments is true and correct.

Date: _____

_____ ▶ _____

Type or print your name *Signature of person making this request*

This is not a Court Order.

For your protection and privacy, please press the Clear button after you have printed the form.

Print Save Clear